

## Article 1. REPORTING REQUIREMENTS

### **Section 1.01** *Financial reports.*

The CONTRACTOR must submit to HHSC the following financial reports as they are described in the RFP:

The Monthly or Quarterly CHIP Financial-Statistical Report in the format set out in Appendix E1 to the RFP, as modified or amended by HHSC;

The Annual CHIP Financial-Statistical Report in the format set out in Appendix E1 to the RFP, as modified or amended by HHSC;

The Affiliate Report; **Note: when this report is submitted and how often it is updated are still under development**

The CONTRACTOR'S Annual Audited Financial Report;

Form HCFA-1513; **Note: when this report is submitted is still under development**

Section 1318 Financial Disclosure Report; **Note: when this report is submitted is still under development**

TDI Examination Report on the CONTRACTOR; and

The CONTRACTOR'S IBNR Plan.

### **Section 1.02** *Encounter Data Specifications Report.*

**Note: This section is still under development.**

### **Section 1.03** *Utilization Management Reports.*

(a) *HEDIS Reporting.*

**Note: This section is still under development.**

(b) *Physical Health*

Physical Health (PH) Utilization Management Reports are required on a quarterly basis due to HHSC or its designee no later than 150 days following the end of the reporting period. The form of the report and the instructions are contained in Appendix E2 to the RFP. The PH Utilization Management Report instructions may periodically be updated by HHSC to facilitate clear communication to the CONTRACTOR.

(c) *Behavioral Health*

Behavioral Health (BH) Utilization Management Reports are required on a quarterly basis due to HHSC or its designee no later than 150 days following the end of the reporting period. The form of

the report and the instructions are contained in Appendix E3 to the RFP. The BH Utilization Report instructions may periodically be updated by HHSC to facilitate clear communication to the health plan.

**Section 1.04 Focused Studies Reports**

The CONTRACTOR must conduct one (1) state-specified focused study and one (1) study chosen by the CONTRACTOR. The state-specified study will be developed through collaboration among HHSC, TDH, the Administrative Contractor, and the health plans and is conducted and submitted on an annual basis. This study must be conducted and data collected using criteria and methods developed by HHSC and TDH in collaboration with the health plans. The report format is set out in the RFP.

**Section 1.05 Annual Quality Improvement Plan (QIP) Summary Report**

An annual Quality Improvement Plan (QIP) summary report must be conducted yearly based on the state fiscal year. The annual QIP summary report must be submitted by March 31 of each year. The information to be included is set out in the RFP.

**Section 1.06 HUB Reports**

The CONTRACTOR must submit quarterly reports documenting the CONTRACTOR'S Historically Underutilized Business (HUB) program efforts and accomplishments. The format for this report is contained in Appendix E5 to the RFP.

**Section 1.07 Fraudulent Practices Report**

The CONTRACTOR must report all fraud and abuse enforcement actions or investigations taken against the CONTRACTOR and/or any of its subcontractors or providers by any state or federal agency for fraud or abuse under Title XVIII or Title XIX of the Social Security Act or any State law or regulation and any basis upon which an action for fraud or abuse may be brought by a State or federal agency as soon as such information comes to the attention of the CONTRACTOR. The report must include information concerning the detection and the disposition of any potential fraudulent or abusive practices.

**Section 1.08 Provider Network Reports**

***(a) PCPs and Specialists Report***

The CONTRACTOR must submit to HHSC or its designee by the date of the readiness review (? - The RFP says at the start of the contract year, which really has no meaning here, and I assume we want this prior to the start of the program on 5/1) an electronic listing of all PCPs participating in their network. The format for this report is contained in Appendix E6 to the RFP.

The CONTRACTOR must also submit to HHSC or its designee by the date of the readiness review an electronic listing of all specialists participating in their network. The format for this report is contained in Appendix E7 to the RFP.

*(b) Provider Network Change Report*

The CONTRACTOR must submit a monthly report summarizing changes in the CONTRACTOR'S provider network. The report must be submitted to HHSC or its designee in the format set out in the RFP 30 days following the end of the reporting month.

*(c) PCP Network and Capacity Report*

The CONTRACTOR must submit electronically to the Administrative Contractor a weekly report that shows changes to the PCP network and PCP capacity.

**Section 1.09 Third Party Recovery (TPR) Reports**

If the CONTRACTOR chooses to engage in Third Party Recovery (TPR) activities, it must file quarterly TPR Reports in accordance with the format developed by the State. TPR reports must include total dollars recovered from third party payers for services to enrollees for each month and the total dollars recovered.

**Section 1.10 All Claims Summary Report**

The CONTRACTOR must submit the "All Claims Summary Report" as a contract year-to-date report. The report must be submitted quarterly by the last day of the month following the reporting period. The report must be submitted to HHSC or its designee in a format specified by HHSC. This report format will be developed collaboratively with the health plans. **Note: when this report is to be submitted is still under development.**

**Section 1.11 Summary Report of Provider and Client Complaints**

The CONTRACTOR must submit enrollee and provider complaints and appeals reports. The CONTRACTOR must also report complaints submitted to its subcontracted risk groups (e.g., IPAs). The complaint reports must be submitted in two paper copies and one electronic copy on or before the 45 days following the end of the state fiscal quarter using the TDI format.

**Section 1.12 Monthly Member Hotline Status Report**

The CONTRACTOR must submit, on a monthly basis, a member hotline status report that contains the elements set out in the RFP.

**Section 1.13 Provider Hotline Performance Report**

The CONTRACTOR must submit, on a monthly basis, a provider telephone status report that contains the elements set out in the RFP.